## **APPLICATION DATA SHEET**

## **APPLICATION INFORMATION**

**Application Type::** 

Utility

Title Line One::

**Determination of Center of Focus by** 

Title Line Two::

**Parameter Variability Analysis** 

**Attorney Docket Number::** 

31162-11-US

Request for Early

Publication?::

No

Request for

Non-Publication?::

No

**Suggested Drawing Figure::** 

7

**Total Drawing Sheets::** 

7

Small Entity?::

Yes

**Secrecy Order in Parent** 

Appl.?::

No

## **APPLICANT INFORMATION**

**Applicant Authority Type::** 

Inventor

**Primary Citizenship** 

Country::

US

Status::

**Full Capacity** 

**Inventor One Given Name::** 

Michael

Middle Name::

E.

Family Name::

Littau

City of Residence::

Bend

State or Province of

Residence::

Oregon

**Country of Residence::** 

US

**Street of Mailing Address::** 

2043 NE Zachary Court

**City of Mailing Address::** 

Bend

State or Province of

**Mailing Address::** Oregon

Country of Mailing Address:: US

Postal or Zip Code of Mailing

Address:: 97701

**Applicant Authority Type::** Inventor

**Primary Citizenship** 

Country:: US

Status:: **Full Capacity** 

**Inventor One Given Name::** Christopher

Middle Name:: J.

Family Name:: Raymond

City of Residence:: Bend

State or Province of

Residence:: Oregon

Country of Residence:: US

**Street of Mailing Address::** 1927 NW Hill Point Drive

**City of Mailing Address::** Bend

State or Province of

Mailing Address:: Oregon

**Country of Mailing Address::** US

Postal or Zip Code of Mailing

Address:: 97701

## CORRESPONDENCE INFORMATION

**Correspondence Customer** 

No.:: 005179

**Phone Number::** (505) 998-1500

Fax Number:: (505) 243-2542

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E-Mail Address::

info@peacocklaw.com

REPRESENTATIVE INFORMATION

**Representative Customer** 

Number::

005179

**DOMESTIC PRIORITY INFORMATION** 

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application Claiming the Benefit Under 35 USC 119(e)	60/462,353	041/10/2003

**ASSIGNEE INFORMATION** 

**Assignee Name::** 

Accent Optical Technologies, Inc.

**Street of Mailing Address::** 

131 NW Hawthorne Boulevard

Suite 207

**City of Mailing Address::** 

Bend

**State or Province of Mailing** 

Address:

Oregon

**Country of Mailing Address::** 

US

Postal or Zip Code of Mailing

Address::

97701-2958